

OPEN MEETING AGENDA ITEM

ARROYO WATER COMPANY, INC.

ORIGINAL

HC 6 BOX 1048 L PAYSON, ARIZONA 85541 928-474-1766 FAX: 928-474-7812

April 3, 2009

Docket Control Arizona Corporation Commission

1200 W. Washington St. Phoenix, Arizona 85007

RE: W-0\(\frac{1}{2}86A-04-0774\)
Decision # 70206

Enclosed for docket is the monthly coliform test results, dated 3/11/09 from Test America.

Well meter read: 40817500

Thank you.

Arizona Corporation Commission DOCKETED

APR 13 2009

DOCKETED BY

RECEIVED

APR 13 P 3 5

CORP COMMISSION

(This form is only for DISTRIBUTION SYSTEM compliance samples)

AZ04-04-083			Arroyo Water Co.					
PWS ID Number			Name of Public Water System					
03/11/09 14:45				Jay Harreli 928-472-3109				
Sample	Date	Time	Own		nd 10-Digit Phone Nu	mber		
		(24- hour clock)						
MAR	CH 64.	woll.						
,	-							
				-Only use if Initi	ial Sample was Po	sitive-		
	0" 10	<u>4</u>	_	O				
Sampling	g Site ID	or Name		Specimen ID Number of Initial Sample				
				Choose One:	Repeat, Original	Location		
					Repeat, Other Lo			
					Repeat, Downstr			
					Repeat, Upstream			
			İ		=	(Single Tap Only)		
					300mL Repeat (S	Single Tap Only)		
			<u>L</u>					
			Microbiolo	gical Analysis				
			WINDIODIO	giodi Alidiyala		Result		
Analysis			Contaminant	Cont	Analysis Run	"P" = Present		
Method		MCL*	Name	Code	Date/Time	"A" = Absent		
WICHIOU			ramo		Data fille	71 71000111		
	0000	Present/2 or	Total Coliforn	2400	02/42/2000 44,55	ARCENT		
	9223	more coliform)	Total Coliform	3100	03/13/2009 11:55	ABSENT		
		Only Papart Ea	cal/E Coli Pasult	if Total Coliform R	Popult in Popitiva			
		Omy Neport re	care.com Nesun	in rotal comotili is	result is rositive	Result		
Analysis			Contaminant	Cont	Analysis Run	"P" = Present		
Analysis Method		MCL*	Name	Code	Date/Time	"A" = Absent		
			14dille		Date/Tillie	74 - Apocit		
		Present/2 or	Table Octions	2040				
		more coliform)	Fecal Coliform	3013				
	0000	Present/2 or	Escherichia coli					
****	9223	more coliform)	or E. Coli	3014				
*MCL:	•			ore total coliform-p		141		
	ir syst	em is ≥ 33,000, til	en no more man	5% Of the samples	may be total coliforn	n-positive.		
			Laborator	y Information				
				/ laboratory personne	AN.			
			(To be filled out by	rianoratory personne	31 <i>)</i>			
Specime	en Numbe	ar. D	SC0804-02A	Lab ID Numbe	er: AZ0728			
Lab Nan		stAmerica Phoenix	300004-02/4	Lab ID Nullibe	GI. ALVIZO			
			Lab Contact:	Corey	Schrader 602-437-334	0		
Printed Name and Phone Number of Lab Contact: Corey Schrader 602-437-3340 Authorized Signature: Corey Schrader 602-437-3340						<u> </u>		
Date Public Water System Notified:					3/2009			
Comments:				03/10	JI 2003			
		pleted form to:		·				
r igabe i	nan com	•	ona Department	of Environmental Qu	ality			
		, u 12	•	Data Unit 5415B-1				

1110 West Washington Street, Phoenix, Arizona 85007 For Questions Call: (602) 771-4641 or within AZ (800) 234-5677 ext. 771-4641

(This form is only for DISTRIBUTION SYSTEM compliance samples)

AZ04-04-029	and the second second		Jake's Corner Wa	ater Supply	Service Control of the Control of the Service	
PWS ID Numb		Name of Public Water System				
03/11/09	<u>13:50</u>		Jay Harrell 928-			
Sample Date	Time	Own	er/Contact Person and	l 10-Digit Phone Nun	nber	
	(24- hour clock)			1.00	Control of the second of the s	
	•			*************************************		
EXTENI	TED MONITORING		-Only use if Initial	Sample was Pos	itive-	
Sampling Site	ID or Name	_	Specimen ID N	lumber of Initial Sam	iple	
			Choose One:	Repeat, Original L	_ocation	
				Repeat, Other Lo		
			F	Repeat, Downstre		
			 -	Repeat, Upstream		
		l l	Ħ	400mL Repeat (S		
			F	300mL Repeat (S		
			L			
		Microbiolo	gical Analysis		· · · · · · · · · · · · · · · · · · ·	
			g, ca. ,, c.c		Result	
Analysis		Contaminant	Cont	Analysis Run	"P" = Present	
Method	MCL*	Name	Code	Date/Time	"A" = Absent	
	Present/2 or					
9223	more coliform)	Total Coliform	3100 <u>C</u>	3/13/2009 11:55	ABSENT	
	Only Report Fe	cal/E.Coli Result	if Total Coliform Res	sult is Positive		
					Result	
Analysis		Contaminant	Cont	Analysis Run	"P" = Present	
Method	MCL*	Name	Code	Date/Time	"A" = Absent	
	Present/2 or	- 10.05	0040			
	more coliform) Present/2 or	Fecal Coliform	3013 _			
9223		Escherichia coli or E. Coli	3014			
	system is \leq 33,000, th		-	sitive.		
	system is \geq 33,000, th				1-positive.	
		Laborator	y Information			
		(To be filled out by	laboratory personnel)			
Specimen Nur	mber: P	SC0802-06A	Lab ID Number:	AZ0728		
Lab Name:	TestAmerica Phoenix			***************************************		
	and Phone Number of	Lab Contact:		n <u>rader 602-437-3340</u>)	
Authorized Signature:				03/18/2009		
	/ater System Notified:		03/18/2	1009		
Comments:	ompleted form to:					
i lease man c		zona Department o	of Environmental Quali	ity		
		•		•		

Arizona Department of Environmental Quality
Water Quality Data Unit 5415B-1

1110 West Washington Street, Phoenix, Arizona 85007

For Questions Call: (602) 771-4641 or within AZ (800) 234-5677 ext. 771-4641

Instructions for the Arizona Drinking Water Microbiological Analysis Reporting Form

DWAR-1 last modified 11/01/07

(This form is only for DISTRIBUTION SYSTEM compliance samples)

AZ04-04-	029			Jake's Corner W	ater Supply	and the state of t	
PWS ID Number				Name of Public Water System			
03/11/		13:55	Jay Harrell 928-472-3109 Owner/Contact Person and 10-Digit Phone Number				
Sample D	Jate	Time (24- hour clock)	Ow	ner/Contact Person and	d 10-Digit Phone Nu	mber	
		(24- Hour Clock)				material control	
į	,	DIOW UP	· [-Only use if Initial Sample was Positive-			
Sampling			-	Specimen ID Number of Initial Sample			
OGpg	, 0.10 12						
]	Choose One:			
			į	Repeat, Other Location			
				ļ	Repeat, Downstr		
				<u> </u>	m Location		
					400mL Repeat (
				Ĺ	300mL Repeat (Single Lap Only)	
			⊒ Microbiol	ogical Analysis			
				- G		Result	
Analysis			Contaminant	Cont	Analysis Run	"P" = Present	
Method		MCL*	Name	Code	Date/Time	"A" = Absent	
		Present/2 or					
	9223	more coliform)	Total Coliform	3100	03/13/2009 11:55	ABSENT	
		Only Papart For	sal/E Coli Bosu	It if Total Coliform Re	sult is Positivo		
		Omy Report Fed	Jai/L.Coli Resu	it ii Total Comonii Re	Suit is Positive	Result	
Analysis			Contaminant	Cont	Analysis Run	"P" = Present	
Method		MCL*	Name	Code	Date/Time	"A" = Absent	
		Present/2 or					
		more coliform)	Fecal Coliform	3013			
		Present/2 or	Escherichia col	li			
	9223	more coliform)	or E. Coli	3014			
*MCL:	•			more total coliform-po		***	
	It sys	tem is ≥ 33,000, the	n no more thai	n 5% of the samples n	nay be total collfor	m-positive.	
			Laborato	ry Information			
		(y laboratory personnel)	•		
0	N.I	D1	200000 074	Lab ID Novasban	. 470700		
Specimer Lab Nam		er:	SC0802-07A	Lab ID Number	: <u>AZ0728</u>		
			ah Contact:	Corey Sc	hrader 602-437-334	0	
Printed Name and Phone Number of Lab Con Authorized Signature:			Lab Cornact	Cony School		<u> </u>	
Date Public Water System Notified:				03/18/			
Comments:							
Please m	nail com	pleted form to:					
		Ariz	•	of Environmental Qual	lity		

Water Quality Data Unit 5415B-1

1110 West Washington Street, Phoenix, Arizona 85007

For Questions Call: (602) 771-4641 or within AZ (800) 234-5677 ext. 771-4641

Arizona Department of Enivronmental Quality **Drinking Water Microbiological Analysis Report** (This form is <u>only</u> for DISTRIBUTION SYSTEM compliance samples)

AZ04-04-029		Jake's Corner Water Supply				
PWS ID Number	40.50	Name of Public Water System				
03/11/09 Sample Date	13:59 Time	Over	Jay Harrell 928-4		nher	
Sample Date	(24- hour clock)	Owner/Contact Person and 10-Digit Phone Number				
						
R3 F	ollow up		-Only use if Initial	Sample was Pos	itive-	
Sampling Site ID		-	Specimen ID Number of Initial Sample			
	MONITORIN L		Choose One:	Repeat, Original L Repeat, Other Loc Repeat, Downstre Repeat, Upstream 400mL Repeat (S 300mL Repeat (S	Location cation cation cam Location n Location ingle Tap Only)	
		Microbiolo	ogical Analysis			
Amahada		Contaminant	Cont	Analysis Run	Result "P" = Present	
Analysis Method	MCL*	Name		Date/Time	"A" = Absent	
	Present/2 or				· · · · · · · · · · · · · · · · · · ·	
9223	more coliform)	Total Coliform	3100 <u>03</u>	3/13/2009 11:55	ABSENT	
	Only Report Fe	cal/E.Coli Resul	t if Total Coliform Res	ult is Positive	Result	
Analysis		Contaminant	Cont	Analysis Run	"P" = Present	
Method	MCL*	Name		Date/Time	"A" = Absent	
	Present/2 or more coliform) Present/2 or	Fecal Coliform Escherichia coli	3013			
9223	more coliform)	or E. Coli	3014			
			nore total coliform-pos	itive.		
If sys	tem is \geq 33,000, the	en no more than	5% of the samples ma	y be total coliforn	1-positive.	
			ry Information y laboratory personnel)			
Specimen Number		SC0802-08A	Lab ID Number:	AZ0728	<u> </u>	
	stAmerica Phoenix d Phone Number of	Lab Contact:	Corey Schr	rader 602-437-3340)	
Authorized Signa		Lab Contact: Corey Schrader 602-437-3340				
Date Public Water	r System Notified:		03/18/20	09		
Comments:	mintad forms to					
Please mail com		rona Denartment	of Environmental Quality	V		
	7 ,12		Data Unit 5415B-1	,		
	1110 W		treet Phoenix Arizona 8	35007		

For Questions Call: (602) 771-4641 or within AZ (800) 234-5677 ext. 771-4641 Instructions for the Arizona Drinking Water Microbiological Analysis Reporting Form

(This form is only for DISTRIBUTION SYSTEM compliance samples)

AZ04-04	-029			Jake's Corner	Water Supply			
PWS ID	Number	 			Water System			
03/11/		14:10	Jay Harrell 928-472-3109					
Sample I	Date	Time	Owr	ner/Contact Person	and 10-Digit Phone Nu	mber		
		(24- hour clock)						
E		DED MONITORING	•	-Only use if Initial Sample was Positive-				
Sampling	Site ID	llow up or Name	-	Specimen ID Number of Initial Sample				
Sampling	J Site ID (or Name		·				
				Choose One:	Repeat, Original Repeat, Other Lo Repeat, Downstr Repeat, Upstrear 400mL Repeat (S	ecation eam Location m Location Single Tap Only)		
			Microbiolo	ogical Analysis				
Amelysis			Contaminant	Cont	Analysis Run	Result "P" = Present		
Analysis Method		MCL*	Name	Code	Date/Time	"A" = Absent		
		Present/2 or						
	9223	more coliform)	Total Coliform	3100	03/13/2009 11:55	ABSENT		
		Only Report Fe	cal/E.Coli Result	t if Total Coliform	Result is Positive	D H		
Analysis			Contaminant	Cont	Analysis Run	Result "P" = Present		
Method		MCL*	Name	Code	Date/Time	"A" = Absent		
		Present/2 or			Date, fille	71 71500111		
		more coliform)	Fecal Coliform	3013				
		Present/2 or	Escherichia coli					
	9223	more coliform)	or E. Coli	3014				
*MCL:		em is ≤ 33,000 [°] , the	en MCL is 2 or m	nore total coliform	-positive.			
	If syst	em is \geq 33,000, the	en no more than	5% of the sample	s may be total colifori	n-positive.		
			Laborator	y Information				
		(To be filled out by	y laboratory person	nel)			
Specime	n Numbe	r: <u>P</u> :	SC0802-09A	Lab ID Num	ber: <u>AZ0728</u>			
Lab Nam		stAmerica Phoenix						
Printed Name and Phone Number of Lab Contact: Corey Schrader 602-437-3340						<u> </u>		
Authorized Signature:			Cay Shrul_					
Date Public Water System Notified:			03/	18/2009				
Commer		nlated farm to:						
riease n	nau com	pleted form to:	ona Donartmant	of Environmental C	Mality			
		Anz	ona Department	of Environmental C	luanty			

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(This form is only for DISTRIBUTION SYSTEM compliance samples)

AZ04-04-029				Jake's Corner Water Supply				
PWS ID Number			Name of Public Water System					
03/11/		14:15 Times	Jay Harrell 928-472-3109 Owner/Contact Person and 10-Digit Phone Number					
Sample [Jate	Time (24- hour clock)	Ow	mer/Contac	il Person a	na 10-Digit Phone Nui	nbei	
		(21 7/30. 3.33.1)						
Ex		> MONITORING		-Only use if Initial Sample was Positive-				
Sampling		or Name	-	Specimen ID Number of Initial Sample				
Campini	, GRO ID			Choose		Repeat, Original I Repeat, Other Lo Repeat, Downstre Repeat, Upstrear 400mL Repeat (S	Location cation eam Location n Location Single Tap Only)	
			Microbio	logical Ana	alysis		Result	
Analysis			Contaminant		Cont	Analysis Run	"P" = Present	
Method		MCL*	Name		Code	Date/Time	"A" = Absent	
	9223	Present/2 or more coliform)	Total Coliform		3100	03/13/2009 11:55	ABSENT	
		Only Report Fed	cal/E.Coli Resu	ılt if Total (Coliform R	lesult is Positive		
A l i-			Contaminant		Cont	Analysis Pun	Result "P" = Present	
Analysis Method		MCL*	Contaminant Name		Code	Analysis Run Date/Time	"A" = Absent	
		Present/2 or more coliform) Present/2 or	Fecal Coliform	1	3013			
	9223	more coliform)	or E. Coli		3014			
*MCL:		tem is \leq 33,000, the tem is \geq 33,000, the				positive. may be total coliforr	n-positive.	
		,	Laborato	ory Inform		n1)		
		(10 be illied out	by laborator	y personne	=1)		
Specime Lab Nam		er: PS stAmerica Phoenix	SC0802-10A	Lat	D Numb	er: <u>AZ0728</u>		
		Phone Number of	Lab Contact:		Corey S	Schrader 602-437-334	0	
Authorized Signature:				Cong School_				
Date Public Water System Notified:			03/18/2009					
Commer								
Please n	nail com	pleted form to:	ona Danariman	it of Environ	mental O	solity		
		Ariz	ona Departmen	II OI EUNIOI	intental Qu	lanty		

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